017000082826

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Namo	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

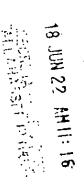




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COVER LETTER

Division of Corporations NAME OF CORPORATION: PRINTDARY INC. DOCUMENT NUMBER: P17000082826 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KEITH A BORDE Name of Contact Person Firm/ Company 901 TAERNIER CIRCLE NE Address PALM BAY, FLORIDA 32905 City/ State and Zip Code pancarib.tt@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KEITH A BORDE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Cerdificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PRINTDARY INC.					
(Name	of Corporation as current	ly filed with the Florida Dept. of State)			
P17000082826					
	(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following	lowing amend	dmen	t(s) to
A. If amending name, enter the new n	ame of the corporation:				
			The I	now)	
	nation "Corp," "Inc," or	on," "company," or "incorporated" or i "Co". A professional corporation name i "P.A."	the abbrevia	tion	
B. Enter new principal office address,	if applicable:	901 TAVERNIER CIRCLE NE			
(Principal office address MUST BE A STREET ADDRESS)		PALM BAY, FLORIDA 32905		_	
				<u>~</u>	
		-		KIN C	
C. Enter new mailing address, if appl		901 TAVERNIER CIRCLE NE	21) 235)	7	<u> </u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		PALM BAY, FLORIDA 32905	7.73 -3		l [i]
			••	=	
			** (. *	_ <u>:</u> _	
D. If amending the registered agent an new registered agent and/or the ne			. * *	٠ċ	
Name of New Registered Agent	KEITH A BORDE				
Name of New Registered Agent	901 TAVERNIER CIRCI	E NE			
		reet address)			
v	PALM BAY	320	005		
New Registered Office Address:			(Zip Code)	_	
New Registered Agent's Signature, if c	hanging Registered Agen	<u>:</u>	43		
I hereby accept the appointment as regis	tered agent. I am jamillar	with and accept the obligations of the posit	uon.		
	- Cha	ud!			
	Signature of New I	Registered Agent, if changing			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	P	ZIYAD AL HINAI	3562 D AVINCI WAY APT 3029
Add	-		MELBOURNE, FL 32901
Remove			
2) Change	VP	McNELS SYLVESTRE	1100 NW 146 STREET
X Add			MIAMI, FL 33168
Remove	S	KEITH A BORDE	901 TAVERNIER CIRCLE NE
3) Change X Add			PALM BAY, FLORIDA 32905
Remove			
4) Change	т	RUTHVEN B WHARWOOD	1401 SHEAFE AVENUE UNIT 10
X Add			PALM BAY, FL 32905
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	les, enter change(s) here: (Re specific)
N/A	(20.1900)
	
	
F. If an amendment provides for an excha provisions for implementing the amendification (if not applicable, indicate N/A) N/A	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

	JUNE 13, 2018	:6 -ab ab ab
The date of each amendmen		, if other than the
late this document was signed		
Effective date <u>if applicable</u> :	JUNE 13, 2018	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	t.
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder	
action was not required.		
JUNF Dated	E 13, 2018	
G : .	1ine	
\$	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	ZIYAD AL HINAI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	